



ANNUAL STATEMENT
For the Year Ending December 31, 2009
OF THE CONDITION AND AFFAIRS OF THE
Advantage Healthplan Inc.

NAIC Group Code	0000 (Current Period)	0000 (Prior Period)	NAIC Company Code	95803	Employer's ID Number	52-1789742
Organized under the Laws of	District of Columbia		State of Domicile or Port of Entry	District of Columbia		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[] Dental Service Corporation[] Other[]		Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[] No[X] N/A[]		Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[X]	
Incorporated/Organized	07/31/1992		Commenced Business	11/01/1994		
Statutory Home Office	1155 15th Street, N.W., Suite 810 (Street and Number)		Washington, DC 20005 (City or Town, State and Zip Code)			
Main Administrative Office	1155 15th Street, N.W., Suite 810 (Street and Number)					
	Washington, DC 20005 (City or Town, State and Zip Code)		(202)785-7835 (Area Code) (Telephone Number)			
Mail Address	P.O. Box 9596 (Street and Number or P.O. Box)		Washington, DC 20016 (City or Town, State and Zip Code)			
Primary Location of Books and Records	1155 15th Street, N.W., Suite 810 (Street and Number)					
	Washington, DC 20005 (City or Town, State and Zip Code)		(202)785-7835 (Area Code) (Telephone Number)			
Internet Website Address						
Statutory Statement Contact	Clinton E Jones (Name)		(202)785-7835 (Area Code)(Telephone Number)(Extension)			
	cjones@ahealthplan.com (E-Mail Address)		(202)785-7839 (Fax Number)			

OFFICERS

Name	Title
Elliot R. Wolff	President
Clinton E Jones	Chief Financial Officer

OTHERS

DIRECTORS OR TRUSTEES

Elliot R. Wolff

State of District of Columbia
County of ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature) Elliot R. Wolff (Printed Name) 1. President (Title)	(Signature) Clinton E. Jones (Printed Name) 2. Chief Financial Officer (Title)	(Signature) (Printed Name) 3. (Title)
Subscribed and sworn to before me this day of , 2010 (Notary Public Signature)	a. Is this an original filing? b. If no, 1. State the amendment number 2. Date filed 3. Number of pages attached	Yes[X] No[]

17	Exhibit 1 - Enrollment By Product Type	NONE
18	Exhibit 2 - Accident and Health Premiums	NONE
19	Exhibit 3 - Health Care Receivables	NONE
20	Exhibit 4 - Claims Unpaid	NONE
21	Exhibit 5 - Amounts Due From Parent	NONE
22	Exhibit 6 - Amounts Due to Parent	NONE
23	Exhibit 7 - Pt1 - Summary Trans. With Prov	NONE
23	Exhibit 7 - Pt 2 - Summary Trans. With Interm	NONE
24	Exhibit 8 - Furniture and Equipment Owned	NONE



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION:		2. LOCATION:								
NAIC Group Code		BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR						NAIC Company Code 95803		
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3				Federal Employees Health Benefit Plan			
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only		Title XVIII Medicare	Title XIX Medicaid	Other
TOTAL Members at end of:										
1.	Prior Year .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2.	First Quarter .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	Second Quarter .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	Third Quarter .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	Current Year .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	Current Year Member Months .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
TOTAL Member Ambulatory Encounters for Year:										
7.	Physician .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	Non-Physician .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	TOTAL .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	Hospital Patient Days Incurred .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	Number of Inpatient Admissions .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Health Premiums Written (b) .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
13.	Life Premiums Direct .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
14.	Property/Casualty Premiums Written .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
15.	Health Premiums Earned .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
16.	Property/Casualty Premiums Earned .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
17.	Amount Paid for Provision of Health Care Services .....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18.	Amount Incurred for Provision of Health Care Services .....	.....	.....	.....	.....	.....	.....	.....	.....	.....

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0.
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION: 2. LOCATION:
BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR
NAIC Group Code NAIC Company Code 95803

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
TOTAL Members at end of:										
1. Prior Year										
2. First Quarter										
3. Second Quarter										
4. Third Quarter										
5. Current Year										
6. Current Year Member Months										
TOTAL Member Ambulatory Encounters for Year:										
7. Physician										
8. Non-Physician										
9. TOTAL										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (b)										
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned										
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services										
18. Amount Incurred for Provision of Health Care Services										

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0.
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0

30 Schedule S - Part 1 - Section 2 NONE

31 Schedule S - Part 2 NONE

32 Schedule S - Part 3 - Section 2 NONE

33 Schedule S - Part 4 NONE

34 Schedule S - Part 5 NONE

35 Schedule S - Part 6 NONE

37 Schedule T - Pt 2 - Interstate Compact Products NONE

38 Schedule Y - Part 1 NONE

39 Schedule Y - Part 2 NONE

SUPPLEMENTAL EXHIBITS AND SCHEDULES
INTERROGATORIES

Response

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	Yes
2. Will an actuarial opinion be filed by March 1?	See Explanation
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	Yes
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	Yes
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	Yes
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	Yes
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	See Explanation
JUNE FILING	
8. Will an audited financial report be filed by June 1?	Yes
9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	Yes

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but it is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
10. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	No
11. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	No
12. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?	No
13. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	No
14. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	No
15. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	No
16. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	No
APRIL FILING	
17. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	No
18. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	No
19. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	No

Explanations:

2. The Company has had no claims outstanding for 3 years, there are no reserves on statement, no members, policies or related operations.
7. N/A no experience to report.
10. N/A no experience to report.
11. N/A no experience to report.
12. N/A no experience to report.
13. N/A no experience to report.
14. N/A no experience to report.
15. N/A no experience to report.
16. N/A no experience to report.
17. N/A no experience to report.
18. N/A no experience to report.
19. N/A no experience to report.

Bar Codes:

Medicare Supplement Insurance Experience Exhibit



95803200936000002009Document Code: 360

Health Life Supplement



95803200920500002009Document Code: 205

Health Property / Casualty Supplement



95803200920700002009Document Code: 207

Schedule SIS



95803200942000002009Document Code: 420

Actuarial Opinion on Participating and Non-Participating Policies



95803200937100002009Document Code: 371

Statement of Non-Guaranteed Elements for Exhibit 5



95803200937000002009Document Code: 370

Medicare Part D Coverage Supplement



95803200936500002009Document Code: 365

LTC Supplemental Interrogatories



95803200930600002009Document Code: 306

Health Life Supplement - LHA Guaranty Association Reconciliation



95803200921100002009Document Code: 211

Health Property/Casualty Supplement - Insurance Expense Exhibit



95803200921300002009Document Code: 213

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1404.
1497. Summary of remaining write-ins for Line 14 (Lines 1404 through 1496)

OVERFLOW PAGE FOR WRITE-INS

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
0504. ....										... X X X ...
0597. Summary of remaining write-ins for Line 5 (Lines 0504 through 0596) .....										... X X X ...
1304. 0 .....										... X X X ...
1397. Summary of remaining write-ins for Line 13 (Lines 1304 through 1396) .....										... X X X ...



Medicare Part D Coverage Supplement
(Net of Reinsurance)

NAIC Group Code: (To be Filed By March 1) NAIC Company Code: 95803

	Individual Coverage		Group Coverage		5 Total Cash
	1	2	3	4	
	Insured	Uninsured	Insured	Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage		X X X		X X X	
1.12 Without Reinsurance Coverage		X X X		X X X	
1.13 Risk-Corridor Payment Adjustments		X X X		X X X	
1.2 Supplemental Benefits		X X X		X X X	
2. Premiums Due and Uncollected - change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage		X X X		X X X	X X X
2.12 Without Reinsurance Coverage		X X X		X X X	X X X
2.2 Supplemental Benefits		X X X		X X X	X X X
3. Unearned Premium and Advance Premium - change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage		X X X		X X X	X X X
3.12 Without Reinsurance Coverage		X X X		X X X	X X X
3.2 Supplemental Benefits		X X X		X X X	X X X
4. Risk-Corridor Payment Adjustments - change					
4.1 Receivable		X X X		X X X	X X X
4.2 Payable		X X X		X X X	X X X
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage		X X X		X X X	X X X
5.12 Without Reinsurance Coverage		X X X		X X X	X X X
5.13 Risk-Corridor Payment Adjustments		X X X		X X X	X X X
5.2 Supplemental Benefits		X X X		X X X	X X X
6. Total Premiums		X X X		X X X	
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage				X X X	
7.12 Without Reinsurance Coverage				X X X	
7.2 Supplemental Benefits				X X X	
8. Claim Reserves and Liabilities - change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage		X X X		X X X	X X X
8.12 Without Reinsurance Coverage		X X X		X X X	X X X
8.2 Supplemental Benefits		X X X		X X X	X X X
9. Healthcare Receivables - change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage		X X X		X X X	X X X
9.12 Without Reinsurance Coverage		X X X		X X X	X X X
9.2 Supplemental Benefits		X X X		X X X	X X X
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage		X X X		X X X	X X X
10.12 Without Reinsurance Coverage		X X X		X X X	X X X
10.2 Supplemental Benefits		X X X		X X X	X X X
11. Total Claims		X X X		X X X	
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid - net to reimbursements applied	X X X		X X X		
12.2 Reimbursements Received but Not Applied - change	X X X		X X X		
12.3 Reimbursements Receivable - change	X X X		X X X		X X X
12.4 Healthcare Receivables - change	X X X		X X X		X X X
13. Aggregate Policy Reserves - change					X X X
14. Expenses Paid		X X X		X X X	
15. Expenses Incurred		X X X		X X X	X X X
16. Underwriting Gain/Loss		X X X		X X X	X X X
17. Cash Flow Results	X X X	X X X	X X X	X X X	



LIFE SUPPLEMENTS

To Be Filed By March 1

For the Year

NONE

 2009

Of The Advantage Healthplan Inc. Insurance Company

Address (City, State and Zip Code) Washington, DC 20005

NAIC Group Code 0000 NAIC Company Code 95803 Employer's ID Number 52-1789742

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1	2	3	4	5	6
Valuation Standard	Total	Industrial	Ordinary	Credit (Group and Individual)	Group
<div>NONE</div>					
9999999 Totals - (Net) -Page 3, Line 1

EXHIBIT 5 - INTERROGATORIES

1.1 Has the reporting entity ever issued both participating and non-participating contracts?

1.2 If not, state which kind is issued.

Yes[] No[X]

2.1 Does the reporting entity at present issue both participating and non-participating contracts?

2.2 If not, state which kind is issued.

Yes[] No[X]

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?

If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

Yes[] No[X]

4. Has the reporting entity any assessment or stipulated premium contracts in force?

If so, state:

4.1 Amount of insurance?

4.2 Amount of reserve?

4.3 Basis of reserve

4.4 Basis of regular assessments

4.5 Basis of special assessments

4.6 Assessments collected during the year

Yes[] No[X]

\$ 0

\$ 0

\$ 0

5. If the contract loan interest rate guaranteed in any one or more of its current contracts is more than 5%, not in advance, state the contract loan rate guarantees on any such contracts

NONE

6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?

6.1 If so, state the amount of reserve on such contracts on the basis actually held:

6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1, and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits:

Attach statement of methods employed in their valuation.

Yes[] No[X]

\$ 0

\$ 0

7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year?

7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements?

7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount

7.3 State the amount of reserves established for this business:

7.4 Identify where the reserves are reported in the blank

Yes[] No[X]

\$ 0

\$ 0

Supp31

EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS

	1	2	3	4	5	6
	Total	Guaranteed Interest Contracts	Annuities Certain	Supplemental Contracts	Dividend Accumulations or Refunds	Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance
2. Deposits received during the year
3. Investment earnings credited to the account
4. Other net change in reserves
5. Fees and other charges assessed
6. Surrender charges
7. Net surrender or withdrawal payments
8. Other net transfers to or (from) Separate Accounts
9. Balance at the end of current year before reinsurance (Lines 1 + - 5 - 6 - 7 - 8)
10. Reinsurance balance at the beginning of the year
11. Net change in reinsurance assumed
12. Net change in reinsurance ceded
13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12)
14. Net balance at the end of current year after reinsurance (Lines 9 + 13)

NONE

SCHEDULE S - PART 1 - SECTION 1

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities

Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsured	Location	Type of Reinsurance Assumed	Amount of In force at End of Year	Reserve	Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
NONE											
0799999 Totals

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability
Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Type of Reinsurance Ceded	7 Amount in Force at End of Year	Reserve Credit Taken		10	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8 Current Year	9 Prior Year	Premiums	11 Current Year	12 Prior Year		
NONE													
1599999 Totals													



PROPERTY / CASUALTY SUPPLEMENTS

(To Be Filed On Or Before March 1)

For the Year

NONE

 2009

Of The Advantage Healthplan Inc. Insurance Company

Address (City, State and Zip Code) Washington, DC 20005

NAIC Group Code 0000 NAIC Company Code 95803 Employer's ID Number 52-1789742

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (000 Omitted)

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Columns 6 + 7							
					NONE									
9999999 Totals														

SCHEDULE F - PART 3
Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									Reinsurance Payable		18 Net Amount Recoverable From Rein- surers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Columns 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers		
9999999 Totals	

NOTE: A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1)
2)
3)
4)
5)

NONE

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
1)	Yes[] No[X] ...
2)	Yes[] No[X] ...
3)	Yes[] No[X] ...
4)	Yes[] No[X] ...
5)	Yes[] No[X] ...

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2. 2000 X X X ...
3. 2001 X X X ...
4. 2002 X X X ...
5. 2003 X X X ...
6. 2004 X X X ...
7. 2005 X X X ...
8. 2006 X X X ...
9. 2007 X X X ...
10. 2008 X X X ...
11. 2009 X X X ...
12. Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	N O N E			.....	.....	.....	.....	... X X X ...
2. 2000 X X X ...
3. 2001 X X X ...
4. 2002 X X X ...
5. 2003 X X X ...
6. 2004 X X X ...
7. 2005 X X X ...
8. 2006 X X X ...
9. 2007 X X X ...
10. 2008 X X X ...
11. 2009 X X X ...
12. Totals X X X ...

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....	.....
2. 2000
3. 2001
4. 2002
5. 2003
6. 2004
7. 2005
8. 2006
9. 2007
10. 2008
11. 2009
12. Totals ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....	.....

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 1A
HOMEOWNERS/FARMOWNERS

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1.	Prior					NONE								
2.	2000													
3.	2001													
4.	2002													
5.	2003													
6.	2004													
7.	2005													
8.	2006													
9.	2007													
10.	2008													
11.	2009													
12.	Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1B
PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior						NONE							
2. 2000													
3. 2001													
4. 2002													
5. 2003													
6. 2004													
7. 2005													
8. 2006													
9. 2007													
10. 2008													
11. 2009													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	34 Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1C
COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	NONE				.....	.....	.....	.....
2. 2000	NONE				.....	.....	.....	.....
3. 2001	NONE				.....	.....	.....	.....
4. 2002	NONE				.....	.....	.....	.....
5. 2003	NONE				.....	.....	.....	.....
6. 2004	NONE				.....	.....	.....	.....
7. 2005	NONE				.....	.....	.....	.....
8. 2006	NONE				.....	.....	.....	.....
9. 2007	NONE				.....	.....	.....	.....
10. 2008	NONE				.....	.....	.....	.....
11. 2009	NONE				.....	.....	.....	.....
12. Totals	NONE				.....	.....	.....	.....

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1D
WORKERS' COMPENSATION

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	NONE				.....	.....	.....	.....
2. 2000	NONE				.....	.....	.....	.....
3. 2001	NONE				.....	.....	.....	.....
4. 2002	NONE				.....	.....	.....	.....
5. 2003	NONE				.....	.....	.....	.....
6. 2004	NONE				.....	.....	.....	.....
7. 2005	NONE				.....	.....	.....	.....
8. 2006	NONE				.....	.....	.....	.....
9. 2007	NONE				.....	.....	.....	.....
10. 2008	NONE				.....	.....	.....	.....
11. 2009	NONE				.....	.....	.....	.....
12. Totals	NONE				.....	.....	.....	.....

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	34 Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1E
COMMERCIAL MULTIPLE PERIL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25		
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid						
	13	14	15	16	17	18	19	20	21	22					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	NONE				.....	.....	.....
2. 2000
3. 2001
4. 2002
5. 2003
6. 2004			
7. 2005			
8. 2006			
9. 2007			
10. 2008			
11. 2009			
12. Totals			

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	34 Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1F - SECTION 1
MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior						NONE							
2. 2000													
3. 2001													
4. 2002													
5. 2003													
6. 2004													
7. 2005													
8. 2006													
9. 2007													
10. 2008													
11. 2009													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	34 Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1F - SECTION 2
MEDICAL PROFESSIONAL LIABILITY - CLAIMS - MADE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	NONE			
2. 2000
3. 2001
4. 2002
5. 2003	
6. 2004	
7. 2005	
8. 2006	
9. 2007	
10. 2008	
11. 2009	
12. Totals	

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1G
SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior						NONE							
2. 2000													
3. 2001													
4. 2002													
5. 2003													
6. 2004													
7. 2005													
8. 2006													
9. 2007													
10. 2008													
11. 2009													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	.... X X X ...	.... X X X ...	.... X X X ...	.... X X X ...	.... X X X ...	.... X X X ...	.....	.....	.... X X X ...	.....	.....
2. 2000
3. 2001
4. 2002
5. 2003
6. 2004
7. 2005
8. 2006
9. 2007
10. 2008
11. 2009
12. Totals	.... X X X ...	.... X X X ...	.... X X X ...	.... X X X ...	.... X X X ...	.... X X X ...	.....	.....	.... X X X ...	.....	.....

SCHEDULE P - PART 1H - SECTION 1
OTHER LIABILITY - OCCURRENCE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	NONE					
2. 2000
3. 2001
4. 2002
5. 2003	
6. 2004	
7. 2005	
8. 2006	
9. 2007	
10. 2008	
11. 2009	
12. Totals	

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1H - SECTION 2
OTHER LIABILITY - CLAIMS - MADE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	NONE				.....	.....	.....	.....
2. 2000	NONE				.....	.....	.....	.....
3. 2001	NONE				.....	.....	.....	.....
4. 2002	NONE				.....	.....	.....	.....
5. 2003	NONE				.....	.....	.....	.....
6. 2004	NONE				.....	.....	.....	.....
7. 2005	NONE				.....	.....	.....	.....
8. 2006	NONE				.....	.....	.....	.....
9. 2007	NONE				.....	.....	.....	.....
10. 2008	NONE				.....	.....	.....	.....
11. 2009	NONE				.....	.....	.....	.....
12. Totals	NONE				.....	.....	.....	.....

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	34 Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 11

SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		NONE						
	13	14	15	16	17								
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed								
									21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior													
2. 2008													
3. 2009													
4. Totals													

		Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
		26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	Totals	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....

SCHEDULE P - PART 1J
AUTO PHYSICAL DAMAGE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...									... X X X ...
2.	2008 ...	.....	.....	.....									.....
3.	2009 ...	.....	.....	.....									.....
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...									... X X X ...

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Case Basis		21	22			
		13	14	15	16	17	NONE							
Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Direct and Assumed	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed				
1. Prior	
2. 2008	
3. 2009	
4. Totals	

NONE

		Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
		26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2.	2008 ...	.....	.....	.....	.....	.....	.....			.....
3.	2009 ...	.....	.....	.....	.....	.....	.....			.....
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1K
FIDELITY/SURETY

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior
2. 2008
3. 2009
4. Totals

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid

1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....
2. 2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. Totals ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....

SCHEDULE P - PART 1L
OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
		13	14	15	16	17	18	19	20					
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1.	Prior ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	Totals ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

NONE

		Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
		26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
	
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....

SCHEDULE P - PART 1M
INTERNATIONAL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	NONE					
2. 2000
3. 2001
4. 2002
5. 2003	
6. 2004	
7. 2005	
8. 2006	
9. 2007	
10. 2008	
11. 2009	
12. Totals	

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000		
3. 2001		
4. 2002		
5. 2003		
6. 2004		
7. 2005		
8. 2006		
9. 2007		
10. 2008		
11. 2009		
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....

SCHEDULE P - PART 10 - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25		
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid						
	13	14	15	16	17	18	19	20	21	22					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior						NONE								...	X X X
2. 2000						NONE								...	X X X
3. 2001						NONE								...	X X X
4. 2002						NONE								...	X X X
5. 2003														...	X X X
6. 2004														...	X X X
7. 2005														...	X X X
8. 2006														...	X X X
9. 2007														...	X X X
10. 2008														...	X X X
11. 2009														...	X X X
12. Totals														...	X X X

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25	
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid					
	13	14	15	16	17	18	19	20	21	22				
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior						NONE							...	X X X
2. 2000						NONE							...	X X X
3. 2001						NONE							...	X X X
4. 2002						NONE							...	X X X
5. 2003													...	X X X
6. 2004													...	X X X
7. 2005													...	X X X
8. 2006													...	X X X
9. 2007													...	X X X
10. 2008													...	X X X
11. 2009													...	X X X
12. Totals													...	X X X

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000		
3. 2001		
4. 2002		
5. 2003		
6. 2004		
7. 2005		
8. 2006		
9. 2007		
10. 2008		
11. 2009		
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....

SCHEDULE P - PART 1R - SECTION 1
PRODUCTS LIABILITY - OCCURRENCE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	N O N E				.....	.....	.....	.....	.....
2. 2000	N O N E				.....	.....	.....	.....	.....
3. 2001	N O N E				.....	.....	.....	.....	.....
4. 2002	N O N E				.....	.....	.....	.....	.....
5. 2003	N O N E				.....	.....	.....	.....	.....
6. 2004	N O N E				.....	.....	.....	.....	.....
7. 2005	N O N E				.....	.....	.....	.....	.....
8. 2006	N O N E				.....	.....	.....	.....	.....
9. 2007	N O N E				.....	.....	.....	.....	.....
10. 2008	N O N E				.....	.....	.....	.....	.....
11. 2009	N O N E				.....	.....	.....	.....	.....
12. Totals	N O N E				.....	.....	.....	.....	.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	34 Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1R - SECTION 2
PRODUCTS LIABILITY - CLAIMS - MADE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2001 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	2002 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5.	2003 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6.	2004 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7.	2005 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8.	2006 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9.	2007 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

		Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other		23	24	25
		Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Expenses Unpaid				
		13	14	15	16	17	18	19	20	21	22			
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	NONE				.....	.....	.....	.....
2. 2000	NONE				.....	.....	.....	.....
3. 2001	NONE				.....	.....	.....	.....
4. 2002	NONE				.....	.....	.....	.....
5. 2003	NONE				.....	.....	.....	.....
6. 2004	NONE				.....	.....	.....	.....
7. 2005	NONE				.....	.....	.....	.....
8. 2006	NONE				.....	.....	.....	.....
9. 2007	NONE				.....	.....	.....	.....
10. 2008	NONE				.....	.....	.....	.....
11. 2009	NONE				.....	.....	.....	.....
12. Totals	NONE				.....	.....	.....	.....

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2. 2000 ..											
3. 2001 ..											
4. 2002 ..											
5. 2003 ..											
6. 2004 ..											
7. 2005 ..											
8. 2006 ..											
9. 2007 ..											
10. 2008 ..											
11. 2009 ..											
12. Totals ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		

SCHEDULE P - PART 1S
FINANCIAL GUARANTY/MORTGAGE GUARANTY

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ..

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		NONE		21	22			
	13	14	15	16	17								
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed								
1. Prior											Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
2. 2008													
3. 2009													
4. Totals													

		Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet Reserves After Discount	
		26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35	36
											Losses Unpaid	Loss Expenses Unpaid
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....

SCHEDULE P - PART 1T
WARRANTY

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred		Premiums Earned			Loss and Loss Expense Payments								12
		1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed
					4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	... X X X ...

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Expenses Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Defense and Cost Containment		21	22			
	13	14	15	16	17	NONE							
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed								
1. Prior											Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
2. 2008													
3. 2009													
4. Totals													

NONE

		Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company	Net Balance Sheet	
		26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Pooling Participation Percentage	35 Reserves After Discount	36
										Losses Unpaid	Loss Expenses Unpaid	
1.	Prior ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...			... X X X ...		
2.	2008 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.	2009 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.	Totals ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	... X X X ...	.....	.....

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	One Year	Two Year
1. Prior ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2000 ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2001 ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2002 ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2003 ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2004 ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	NONE			.....	.....	.....	.....	.....
7. 2005 ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...				.....	.....	.....	.....	.....
8. 2006 ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...				.....	.....	.....	.....	.....
9. 2007 ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....
10. 2008 ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	... X X X ...
11. 2009 ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	... X X X ...	... X X X ...
12. TOTALS	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

SCHEDULE P - PART 2A
HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred		INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
		1 2000	2 2001	3 2002	4 2003	5 2004	6 2005	7 2006	8 2007	9 2008	10 2009	11 One Year	12 Two Year
1.	Prior												
2.	2000												
3.	2001	XXX											
4.	2002	XXX	XXX										
5.	2003	XXX	XXX	XXX									
6.	2004	XXX	XXX	XXX	XXX								
7.	2005	XXX	XXX	XXX	XXX								
8.	2006	XXX	XXX	XXX	XXX								
9.	2007	XXX	XXX	XXX	XXX								
10.	2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12.	TOTALS												

SCHEDULE P - PART 2B
PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior												
2.	2000												
3.	2001	XXX											
4.	2002	XXX	XXX										
5.	2003	XXX	XXX	XXX									
6.	2004	XXX	XXX	XXX	XXX								
7.	2005	XXX	XXX	XXX	XXX								
8.	2006	XXX	XXX	XXX	XXX								
9.	2007	XXX	XXX	XXX	XXX								
10.	2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12.	TOTALS												

SCHEDULE P - PART 2C
COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior												
2.	2000												
3.	2001	XXX											
4.	2002	XXX	XXX										
5.	2003	XXX	XXX	XXX									
6.	2004	XXX	XXX	XXX	XXX								
7.	2005	XXX	XXX	XXX	XXX								
8.	2006	XXX	XXX	XXX	XXX								
9.	2007	XXX	XXX	XXX	XXX								
10.	2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12.	TOTALS												

SCHEDULE P - PART 2D
WORKERS' COMPENSATION

1.	Prior												
2.	2000												
3.	2001	XXX											
4.	2002	XXX	XXX										
5.	2003	XXX	XXX	XXX									
6.	2004	XXX	XXX	XXX	XXX								
7.	2005	XXX	XXX	XXX	XXX								
8.	2006	XXX	XXX	XXX	XXX								
9.	2007	XXX	XXX	XXX	XXX								
10.	2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12.	TOTALS												

SCHEDULE P - PART 2E
COMMERCIAL MULTIPLE PERIL

1.	Prior												
2.	2000												
3.	2001	XXX											
4.	2002	XXX	XXX										
5.	2003	XXX	XXX	XXX									
6.	2004	XXX	XXX	XXX	XXX								
7.	2005	XXX	XXX	XXX	XXX								
8.	2006	XXX	XXX	XXX	XXX								
9.	2007	XXX	XXX	XXX	XXX								
10.	2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12.	TOTALS												

SCHEDULE P - PART 2F - SECTION 1
MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred		INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
		1 2000	2 2001	3 2002	4 2003	5 2004	6 2005	7 2006	8 2007	9 2008	10 2009	11 One Year	12 Two Year
1.	Prior												
2.	2000												
3.	2001	X X X											
4.	2002	X X X	X X X										
5.	2003	X X X	X X X	X X X									
6.	2004	X X X	X X X	X X X	X X X								
7.	2005	X X X	X X X	X X X	X X X								
8.	2006	X X X	X X X	X X X	X X X								
9.	2007	X X X	X X X	X X X	X X X								
10.	2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11.	2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12.	TOTALS												

SCHEDULE P - PART 2F - SECTION 2
MEDICAL PROFESSIONAL LIABILITY - CLAIMS MADE

1.	Prior												
2.	2000												
3.	2001	X X X											
4.	2002	X X X	X X X										
5.	2003	X X X	X X X	X X X									
6.	2004	X X X	X X X	X X X	X X X								
7.	2005	X X X	X X X	X X X	X X X								
8.	2006	X X X	X X X	X X X	X X X								
9.	2007	X X X	X X X	X X X	X X X								
10.	2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11.	2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12.	TOTALS												

SCHEDULE P - PART 2G
SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1.	Prior												
2.	2000												
3.	2001	X X X											
4.	2002	X X X	X X X										
5.	2003	X X X	X X X	X X X									
6.	2004	X X X	X X X	X X X	X X X								
7.	2005	X X X	X X X	X X X	X X X								
8.	2006	X X X	X X X	X X X	X X X								
9.	2007	X X X	X X X	X X X	X X X								
10.	2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11.	2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12.	TOTALS												

SCHEDULE P - PART 2H - SECTION 1
OTHER LIABILITY - OCCURRENCE

1.	Prior												
2.	2000												
3.	2001	X X X											
4.	2002	X X X	X X X										
5.	2003	X X X	X X X	X X X									
6.	2004	X X X	X X X	X X X	X X X								
7.	2005	X X X	X X X	X X X	X X X								
8.	2006	X X X	X X X	X X X	X X X								
9.	2007	X X X	X X X	X X X	X X X								
10.	2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11.	2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12.	TOTALS												

SCHEDULE P - PART 2H - SECTION 2
OTHER LIABILITY - CLAIMS-MADE

1.	Prior												
2.	2000												
3.	2001	X X X											
4.	2002	X X X	X X X										
5.	2003	X X X	X X X	X X X									
6.	2004	X X X	X X X	X X X	X X X								
7.	2005	X X X	X X X	X X X	X X X								
8.	2006	X X X	X X X	X X X	X X X								
9.	2007	X X X	X X X	X X X	X X X								
10.	2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11.	2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12.	TOTALS												

SCHEDULE P - PART 2I

SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2000	2 2001	3 2002	4 2003	5 2004	6 2005	7 2006	8 2007	9 2008	10 2009	11 One Year	12 Two Year
1. Prior	X X X	X X X	X X X	X X X	N O N E			.....	.....	.....	.....	.....
2. 2008	X X X	X X X	X X X	X X X				.....	.....	.....	.....	.....
3. 2009	X X X	X X X	X X X	X X X				.....	X X X	.....	X X X	.....
4. TOTALS .....											.....	.....

SCHEDULE P - PART 2J

AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	N O N E	XXX .....	.....	.....	.....	.....
2. 2008	XXX	XXX	XXX	XXX		XXX .....	.....	.....	XXX	XXX
3. 2009	XXX	XXX	XXX	XXX		XXX	XXX .....	.....	XXX	XXX
4. TOTALS .....						.....	.....	.....	.....	.....

SCHEDULE P - PART 2K

FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	N O N E	.....	.....	.....	.....	.....
2. 2008	XXX	XXX	XXX	XXX		XXX .....	.....	.....	.....	XXX
3. 2009	XXX	XXX	XXX	XXX		XXX	XXX .....	.....	XXX	XXX
4. TOTALS .....						.....	.....	.....	.....	.....

SCHEDULE P - PART 2L

OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	XXX	XXX	XXX	XXX	N O N E					
2. 2008	XXX	XXX	XXX	XXX		XXX				XXX
3. 2009	XXX	XXX	XXX	XXX		XXX	XXX		XXX	XXX
4. TOTALS										

SCHEDULE P - PART 2M

INTERNATIONAL

1. Prior .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2000 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2001 .....	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2002 .....	... X X X ...	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2003 .....	... X X X ...	... X X X ...	... X X X ...	.....	N O N E			.....	.....	.....	.....	.....
6. 2004 .....	... X X X ...	... X X X ...	... X X X ...	... X X X ...				.....	.....	.....	.....	.....
7. 2005 .....	... X X X ...	... X X X ...	... X X X ...	... X X X ...				.....	.....	.....	.....	.....
8. 2006 .....	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....
9. 2007 .....	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	.....	.....
10. 2008 .....	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	.....	.....	... X X X ...
11. 2009 .....	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.....	... X X X ...	... X X X ...
12. TOTALS .....											.....	.....

SCHEDULE P - PART 2N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	One Year	Two Year
1. Prior												
2. 2000												
3. 2001	X X X											
4. 2002	X X X	X X X										
5. 2003	X X X	X X X	X X X									
6. 2004	X X X	X X X	X X X	X X X								
7. 2005	X X X	X X X	X X X	X X X								
8. 2006	X X X	X X X	X X X	X X X								
9. 2007	X X X	X X X	X X X	X X X	X X X	X X X	X X X					
10. 2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12. TOTALS												

SCHEDULE P - PART 2O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior												
2. 2000												
3. 2001	X X X											
4. 2002	X X X	X X X										
5. 2003	X X X	X X X	X X X									
6. 2004	X X X	X X X	X X X	X X X								
7. 2005	X X X	X X X	X X X	X X X								
8. 2006	X X X	X X X	X X X	X X X								
9. 2007	X X X	X X X	X X X	X X X	X X X	X X X	X X X					
10. 2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12. TOTALS												

SCHEDULE P - PART 2P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES

1. Prior												
2. 2000												
3. 2001	X X X											
4. 2002	X X X	X X X										
5. 2003	X X X	X X X	X X X									
6. 2004	X X X	X X X	X X X	X X X								
7. 2005	X X X	X X X	X X X	X X X								
8. 2006	X X X	X X X	X X X	X X X								
9. 2007	X X X	X X X	X X X	X X X	X X X	X X X	X X X					
10. 2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12. TOTALS												

SCHEDULE P - PART 2R - SECTION 1
PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	One Year	Two Year
1. Prior												
2. 2000												
3. 2001	X X X											
4. 2002	X X X	X X X										
5. 2003	X X X	X X X	X X X									
6. 2004	X X X	X X X	X X X	X X X								
7. 2005	X X X	X X X	X X X	X X X								
8. 2006	X X X	X X X	X X X	X X X								
9. 2007	X X X	X X X	X X X	X X X	X X X	X X X	X X X					
10. 2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12. TOTALS												

SCHEDULE P - PART 2R - SECTION 2
PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior												
2. 2000												
3. 2001	X X X											
4. 2002	X X X	X X X										
5. 2003	X X X	X X X	X X X									
6. 2004	X X X	X X X	X X X	X X X								
7. 2005	X X X	X X X	X X X	X X X								
8. 2006	X X X	X X X	X X X	X X X								
9. 2007	X X X	X X X	X X X	X X X	X X X	X X X	X X X					
10. 2008	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X
11. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X
12. TOTALS												

SCHEDULE P - PART 2S
FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior	X X X	X X X	X X X	X X X								
2. 2008	X X X	X X X	X X X	X X X				X X X				X X X
3. 2009	X X X	X X X	X X X	X X X				X X X	X X X		X X X	X X X
4. TOTALS												

SCHEDULE P - PART 2T
WARRANTY

1. Prior	X X X	X X X	X X X	X X X								
2. 2008	X X X	X X X	X X X	X X X				X X X				X X X
3. 2009	X X X	X X X	X X X	X X X				X X X	X X X		X X X	X X X
4. TOTALS												

**INDEX TO HEALTH
ANNUAL STATEMENT**

Analysis of Operations By Lines of Business	7
Assets	2
Cash Flow	6
Exhibit 1 - Enrollment By Product Type for Health Business Only	17
Exhibit 2 - Accident and Health Premiums Due and Unpaid	18
Exhibit 3 - Health Care Receivables	19
Exhibit 4 - Claims Unpaid and Incentive Pool, Withhold and Bonus	20
Exhibit 5 - Amounts Due From Parent, Subsidiaries and Affiliates	21
Exhibit 6 - Amounts Due To Parent, Subsidiaries and Affiliates	22
Exhibit 7 - Part 1 - Summary of Transactions With Providers	23
Exhibit 7 - Part 2 - Summary of Transactions With Intermediaries	23
Exhibit 8 - Furniture, Equipment and Supplies Owned	24
Exhibit of Capital Gains (Losses)	15
Exhibit of Net Investment Income	15
Exhibit of Nonadmitted Assets	16
Exhibit of Premiums, Enrollment and Utilization (State Page)	29
Five-Year Historical Data	28
General Interrogatories	26
Jurat Page	1
Liabilities, Capital and Surplus	3
Notes To Financial Statements	25
Overflow Page For Write-ins	41
Schedule A - Part 1	E01
Schedule A - Part 2	E02
Schedule A - Part 3	E03
Schedule A - Verification Between Years	SI02
Schedule B - Part 1	E04
Schedule B - Part 2	E05
Schedule B - Part 3	E06
Schedule B - Verification Between Years	SI02
Schedule BA - Part 1	E07
Schedule BA - Part 2	E08
Schedule BA - Part 3	E09
Schedule BA - Verification Between Years	SI03
Schedule D - Part 1	E10
Schedule D - Part 1A - Section 1	SI05
Schedule D - Part 1A - Section 2	SI08
Schedule D - Part 2 - Section 1	E11
Schedule D - Part 2 - Section 2	E12
Schedule D - Part 3	E13
Schedule D - Part 4	E14
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	E16
Schedule D - Summary By Country	SI04
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	SI11
Schedule DB - Part A - Section 1	E18
Schedule DB - Part A - Section 2	E18
Schedule DB - Part A - Section 3	E19
Schedule DB - Part A - Verification Between Years	SI12
Schedule DB - Part B - Section 1	E19
Schedule DB - Part B - Section 2	E20
Schedule DB - Part B - Section 3	E20
Schedule DB - Part B - Verification Between Years	SI12
Schedule DB - Part C - Section 1	E21
Schedule DB - Part C - Section 2	E21
Schedule DB - Part C - Section 3	E22

INDEX TO HEALTH
ANNUAL STATEMENT

Schedule DB - Part C - Verification Between Years	SI13
Schedule DB - Part D - Section 1	E22
Schedule DB - Part D - Section 2	E23
Schedule DB - Part D - Section 3	E23
Schedule DB - Part D - Verification Between Years	SI13
Schedule DB - Part E - Section 1	E24
Schedule DB - Part E - Verification	SI13
Schedule DB - Part F - Section 1	SI14
Schedule DB - Part F - Section 2	SI15
Schedule E - Part 1 - Cash	E25
Schedule E - Part 2 - Cash Equivalents	E26
Schedule E - Part 3 - Special Deposits	E27
Schedule E - Verification Between Years	SI16
Schedule S - Part 1 - Section 2	30
Schedule S - Part 2	31
Schedule S - Part 3 - Section 2	32
Schedule S - Part 4	33
Schedule S - Part 5	34
Schedule S - Part 6	35
Schedule T - Part 2 - Interstate Compact	37
Schedule T - Premiums and Other Considerations	36
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group	38
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	39
Statement of Revenue and Expenses	4
Summary Investment Schedule	SI01
Supplemental Exhibits and Schedules Interrogatories	40
Underwriting and Investment Exhibit - Part 1	8
Underwriting and Investment Exhibit - Part 2	9
Underwriting and Investment Exhibit - Part 2A	10
Underwriting and Investment Exhibit - Part 2B	11
Underwriting and Investment Exhibit - Part 2C	12
Underwriting and Investment Exhibit - Part 2D	13
Underwriting and Investment Exhibit - Part 3	14